

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF HUMAN SERVICES



Mental Retardation and Developmental
Disabilities Administration

ISP AMENDMENT PROCESS

I. PURPOSE

The purpose of the Individual Service Plan (ISP) amendment process is to document any significant changes in a consumer's ISP, due to a change in the consumer's situation, which requires a consensus of the Interdisciplinary Team (IDT).

II. AUTHORITY

The authority of this amendment process is established in D.C. Code §7-1301 et. seq.; *Evans v. the District of Columbia*, June 14, 1978; and *Evans v. Williams*, 35 F. Supp. 2d 88, 97 [D.D.C, February 10, 1999]; Chapter 35 Title 22 DCMR "Licensure of Group Homes for Mentally Retarded Persons," 39 DCR 3280 (5-8-92) (DHS); the ICF-MR Federal Regulations, 42 CFR 440.150; and Department of Human Services, (MRDDA) Individual Support Plan Policy and Procedure.

III. DEFINITIONS

Amendments - refers to those reportable life-altering event(s), which includes urgent changes to the consumer's ISP as agreed upon by the Interdisciplinary Team. Those reportable changes to consumer services, which are a result from the consensus of the Interdisciplinary team should be accompanied with its corresponding clinical evaluation(s), and address the need for an immediate change in the consumer's ISP. Implementation of the Amendment process includes, but is not limited to, immediate changes to a consumer's Health Care Management Plan, Feeding Protocol, Residential/Day Change of Placement.

Case Conference - refers to a separate meeting of the IDT to discuss issues/ concerns regarding a consumer including recommended ISP Amendment(s).

Direct Support Professional Supervisor - refers to all employees of provider agencies who supervise and/or manage paid staff and subcontractors of such agencies, and volunteers or other persons recruited to provide services and supports on behalf of the persons with mental retardation and other developmental disabilities who work in direct contact with MRDDA consumers. The Direct Support Professional Supervisor will also ensure that the home is operating under Chapter 35 Title 22 DCMR "Licensure of Group Homes for Mentally Retarded Persons and D.C. Code 2-137.

Group Home for Mentally Retarded Persons (GHMRP) - are licensed facilities that range in size from (4) to (8) customers. They are funded with appropriated dollars and are operated under contract with the Mental Retardation Developmental Disabilities Administration (MRDDA). Each customer must have an ISP containing behaviorally stated goals and objectives that are based on an appropriate assessment of the individual's needs and strengths. GHMRP facilities must operate under Chapter 35 Title 22 DCMR "Licensure of Group Homes for Mentally Retarded Persons

Interdisciplinary Team (IDT) - refers to the consumer, his/her circle of support, and persons with special training and experience in the diagnosis and habilitation of persons with mental retardation and/or developmental disabilities, which has the responsibility of performing a comprehensive evaluation of each resident and participating in the development, implementation, and monitoring of the consumer's Individual Service Plan (ISP).

Intermediate Care Facility for Mentally Retarded (ICF/MR) - is a licensed residential facility, which is certified and funded through Title XIX (Medicaid). ICF/MR facilities provide active treatment for 4 to 9 customers. Active treatment is an aggressive and organized effort to enable each customer to reach his or her fullest capacity. Twenty-four (24) hour coverage is provided by live-in or shift staff. Each customer must have an Individual Service Plan containing behaviorally stated goals and objectives that are based on an appropriate assessment of the individual's needs and strengths. ICF/MR facilities must operate in accordance to the Federal "Interpretive Guidelines for ICF-MR Tags 100-488.

Nursing Home - refers to a private establishment that provides living quarters and care for the elderly or the chronically ill.

Professional Service Providers - refers to those services provided by individuals trained, qualified, and licensed as required by District of Columbia law in the following disciplines: physicians, dentists/dental hygienist, psychologists, social workers, nutritionists, nurses, physicians assistants, physical/occupational/speech language therapists, behavioral health specialists and all other health care providers.

Qualified Mental Retardation Professional (QMRP) - refers to the person who provides oversight within the ICF-MR for consumers with mental retardation/developmental disabilities by observing individuals, reviewing data and progress, and revising programs based on individual need and performance. In addition, they ensure service design and delivery, which provides each individual with an appropriate active treatment program. The QMRP will also ensure that the home is operating under Chapter 35 Title 22 DCMR "Licensure of Group Homes for Mentally Retarded Persons, the Federal "Interpretive Guidelines for ICF-MR Tags 100-488, and D.C. Code 2-137.

Residential Provider - refers to those responsible parties who manage all consumer acquisition, retention, or improvement in skills related to activities of daily living, such as personal grooming and cleanliness, bed making, household chores, eating and the preparation of food, and the social and adaptive skills necessary to enable the individual to reside in a non-institutional setting.

Significant Changes - refers to any changes in the consumer's situation including but is not limited to: health, social, physical, and/ or behavioral changes that impact the consumer's level of care.

Specialized Care (Foster Care) - a family within a private home living environment provides specialized home care for three (3) or less individuals, under a Specialized Home Care Agreement between the MRDDA, Office of Contracts and the Specialized Home Care Provider. The home must be approved by MRDDA. Foster homes are funded with appropriated dollars. Each customer must have an ISP containing behaviorally stated goals and objectives that are on an appropriate assessment of the individual's needs and strengths.

Supervised Apartment - is typically a shared living arrangement for one to three customers with mental retardation, with drop-in supervision. Supervised Apartments may be single units grouped in a cluster within an apartment complex, or scattered throughout a complex. They are funded with appropriated dollars, under contractual arrangements. Each participant must have an Individual Service Plan containing

behaviorally stated goals and objectives that are based on an appropriate assessment of the individual's needs and strengths.

IV. ROLES AND RESPONSIBILITIES OF THE IDT TEAM

The IDT responsibilities include but are not limited to:

1. Reviewing existing health related recommendations to assess the current status as it relates to the consumer's presenting problems;
2. Specifying the activities or services necessary to address the identified health risks;
3. Identifying health providers responsible for delivering the services;
4. Making arrangements for continuity of care; and
5. Identifying physical health and/or behavioral health needs and services.

V. ISP AMENDMENT PROCESS

Step 1

Immediate changes in consumer services must be reported to the MRDDA Case Manager ISP Unit, once they have been identified within twenty-four (24) hours. The MRDDA, Case Manager will immediately inform the MRDDA ISP Unit of the change(s) needed within twenty-four (24) hours. Once a Case Manager is notified, a service request should be sent to the MRDDA ISP Unit for an Amended ISP. The Case Manager should indicate in the service request whether or not a clinician is needed to attend. Clinician requests must be done at least two (2) days prior to the date of the case conference.

The responsible party to report urgent changes in consumer services for integration into the ISP document are as follows:

- A. In **Community Residential Facilities (CRF)**, the Direct Support Professional Supervisor must report the significant change(s) in consumer services, which need immediate integration into the ISP document to the MRDDA Case Manager. The Direct Support Professional Supervisor must facilitate the process for getting the change integrated into the ISP.
- B. In **Intermediate Care Facilities for the Mentally Retarded (ICF-MR)**, the Qualified Mental Retardation Professional (QMRP) must report the significant change(s) in consumer services, which need immediate integration into the ISP document to the MRDDA Case Manager. The QMRP must facilitate the process for getting the change integrated into the ISP.
- C. In **Specialized Care** (i.e. Foster Care) settings, the Residential Guardian must report the urgent change(s) in consumer services, which need immediate integration into the ISP document to the MRDDA Case Manager. The Residential Guardian must facilitate the process for getting the change integrated into the ISP.
- D. In **Natural Home** settings, the consumer's family must report the urgent change in services, which need immediate integration into the ISP document to the MRDDA Case Manager. The consumer's family must facilitate the process for getting the change integrated into the ISP.
- E. In **Acute Cases** (i.e. Nursing Home, Hospitalization) the MRDDA, Case Manager with the support of Clinical Services must report the urgent changes in consumer services, which need immediate integration into the ISP document.
- F. In **Independent Living Apartment Programs (ILA)**, the MRDDA, Case Manager must report the urgent changes in consumer services, which need immediate integration into the ISP document.

Step 2

A case conference between the consumer and IDT must be held within fourteen (14) days of the significant change in consumer services. The purpose of the IDT meeting is to discuss the immediate change in service(s), which were reported as well as the newly developed goals and objectives, which are needed to assist the consumer with adjusting to the amended changes. If a MRDDA Clinician is needed to attend the case conference, the MRDDA Case Manager must submit a service request at least two (2) days prior to the date of the case conference.

Step 3

Once IDT has approved the amended changes in consumer services, the following forms must be completed and signed by all IDT members at the amended ISP meeting: Cover Page, the ISP Recommendation and Approval Form and all documentation from the Professional Service Provider(s) or team who recommended the amended change(s). The MRDDA, Case Manager must ensure that the amended ISP forms are submitted to the MRDDA, ISP Unit, in the event that the case conference is facilitated without the assistance of a MRDDA, ISP Coordinator.

1. Cover Page - This is the top sheet of the ISP, which will identify at a glance, the name of the consumer, date of birth and other pertinent information that indicates the type of ISP being held.
2. ISP Recommendation and Approval Form - This form is used by the ISP Team to outline the recommended changes to the consumer's ISP. In addition this Form allows the consumer and planning participants to sign off in agreement to the amended changes to the ISP.

VI. DISTRIBUTION

1. Upon receipt of the amended ISP documents, a MRDDA ISP Coordinator from the ISP Unit will review and process the amended ISP documents for submittal to the MRDDA, Bureau of Case Management, within five (5) days. The ISP Tracking and Approval Form will be placed on the front of each amendment that provides information identifying the area(s) that have been amended within the ISP and listing who should be provided with a copy of the amendment to the ISP. (The Tracking and Approval Form is used by the MRDDA Clinical Services and MRDDA Case Management for review, corrections, as well as indicating whom the ISP is to be distributed).
2. The MRDDA Distribution Center will forward a copy of the amended ISP changes to the consumer, members of his/her Circle of Support. The original of this document will be placed in the consumer's record in the Records Room. The Records Room will file the amended ISP on top of the existing ISP, in the ISP section of the record. A complete copy of the amended ISP will be sent to the US District Court for the District of Columbia (if applicable).

VII. RULES AND REGULATIONS FOR AMENDING THE ISP DOCUMENT

If a consumer's ISP meeting is scheduled to be held within thirty (30) days of the identified change in protocol, procedure, and/or service, then the amended changes will be addressed and included at the forthcoming ISP meeting. However, if the ISP meeting is scheduled to be held beyond thirty (30) days of the identified change in protocol, procedure, and/or service, then the amended changes will be incorporated into the existing ISP document.

Signature: _____

Marsha A. Thompson
Marsha Thompson, Interim Administrator

Date: _____

8/2/2005